

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	MR. C.		4/4/00
O.I.P.E. CLASSIFIER			4/4/00
FORMALITY REVIEW			4/4/00
RESPONSE FORMALITY REVIEW	SC. 2	60155	6-1-00 2-3-00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

BEST AVAILABLE COPY

Claim	Date
Final	
Original	
1	4/10/00/2
2	4/10/00/3
3	4/10/00/2
4	4/10/00/2
5	4/10/00/2
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Claim	Date
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If more than 150 claims or 10 actions
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